

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	YBW	75331	
O.I.P.E. CLASSIFIER			10 3-14-00
FORMALITY REVIEW	KA	71622	4/3/00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 + ..... Restricted

## BEST AVAILABLE COPY

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
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If more than 150 claims or 10.actions  
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